

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

Declaration Submitted with Initial Filing

OR

Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	QDP1
First Named Inventor	Barnum
<b>COMPLETE IF KNOWN</b>	
Application Number	/
Filing Date	January 5, 2004
Art Unit	
Examiner Name	

As the below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**Method of Incorporating an Internet Sales Order with Fundraising Tally Data**

*(Title of the Invention)*

the specification of which

is attached hereto

OR

was filed on (MM/DD/YYYY)   as United States Application Number or PCT International

Application Number   and was amended on (MM/DD/YYYY)   (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?
			<input type="checkbox"/>	<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

[Page 1 of 2]

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

## DECLARATION — Utility or Design Patent Application

Direct all correspondence to:  Customer Number  
or Bar Code Label   OR  Correspondence address below

Name **Max W. Garwood**

Address **450 N. Jefferson Street / P.O. Box 30**

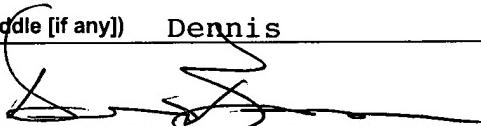
City <b>Huntington</b>	State <b>IN</b>	ZIP <b>46750</b>
------------------------	-----------------	------------------

Country <b>USA</b>	Telephone <b>260-356-4350</b>	Fax <b>260-356-9180</b>
--------------------	-------------------------------	-------------------------

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

**NAME OF SOLE OR FIRST INVENTOR :**  A petition has been filed for this unsigned inventor

Given Name (first and middle [if any]) <b>Dennis</b>	Family Name or Surname <b>Barnum</b>
---	---

	Date <b>1/3/04</b>
---	--------------------

Residence: City <b>Huntington</b>	State <b>IN</b>	Country <b>USA</b>	Citizenship <b>USA</b>
-----------------------------------	-----------------	--------------------	------------------------

Mailing Address **1430 Engle**

City <b>Huntington</b>	State <b>IN</b>	ZIP <b>46750</b>	Country <b>USA</b>
------------------------	-----------------	------------------	--------------------

**NAME OF SECOND INVENTOR:**  A petition has been filed for this unsigned inventor

Given Name (first and middle [if any]) <b>Sara</b>	Family Name or Surname <b>Phares</b>
---	---

	Date <b>1-5-04</b>
---	--------------------

Residence: City <b>Albion</b>	State <b>IN</b>	Country <b>USA</b>	Citizenship <b>USA</b>
-------------------------------	-----------------	--------------------	------------------------

Mailing Address **1316 W 500 N**

City <b>Albion</b>	State <b>IN</b>	ZIP <b>46701</b>	Country <b>USA</b>
--------------------	-----------------	------------------	--------------------

Additional inventors are being named on the \_\_\_\_\_ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

Please type a plus sign (+) inside this box



PTO/SB/81 (02-01)

Approved for use through 10/31/2002. OMB 0651-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it display a valid OMB control number.

## POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	
Filing Date	January 5, 2004
First Named Inventor	Barnum
Title	Method of Incorporating
Group Art Unit	
Examiner Name	
Attorney Docket Number	QDP1

I hereby appoint:

Practitioners at Customer Number

Place Customer  
Number Bar Code  
Label here

OR

Practitioner(s) named below:

Name	Registration Number
Max W. Garwood	47,589

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

The above-mentioned Customer Number.

OR

Practitioners at Customer Number

Place Customer  
Number Bar Code  
Label here

OR

Firm or  
Individual Name

Max W. Garwood

Address

450 N. Jefferson Street

Address

P.O. Box 30

City

Huntington

State

IN

Zip

46750

Country

USA

Telephone

260-356-4350

Fax

260-356-9180

I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name

Sara Phares

Signature

Sara Phares

Date

1-5-04

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

\*Total of \_\_\_\_\_ forms are submitted.

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.